

# Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

<b>1. Agency Name</b> City of San Jose		<b>RECEIVED</b> San Jose City Clerk 2016 DEC 14 PM 3:01 SE OTC	<b>California Form 802</b> For Official Use Only
<b>Division, Department, or Region (If Applicable)</b> Council District 1			
<b>Designated Agency Contact (Name, Title)</b> Chappie Jones, Councilmember			
<b>Area Code/Phone Number</b> (408) 535-4901	<b>E-mail</b> district1@sanjoseca.gov	<input type="checkbox"/> <b>Amendment</b> (Must provide explanation in Part 3.) <b>Date of Original Filing:</b> 12/14/16 (Month, Day, Year)	

## 2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 149.50

Event Description Holiday Triple Ho Show Date(s) 12 / 03 / 16  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐ If no: \_\_\_\_\_  
Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☒ If yes: Jones, Chappie  
Official's Name (Last, First)

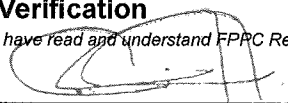
## 3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
Chelsey Seagraves, Public Relations & Policy Advisor	1	Host of Recognition Event.
B. Name of individual <small>(Last, First)</small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
Disability Awareness Day Volunteers	15	To recognize the volunteers who volunteered at this annual event to help raise awareness about various disabilities.

## 4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

	Chappie Jones	Councilmember, District 1	12/14/16
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

Comment: \_\_\_\_\_